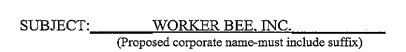
P9900038922 TRANSMITTAL LETTER

Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314



Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

<u>X</u> \$70.00	\$78.75	\$122.50	\$131.25
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate	& Certified Copy	Certified Copy
			& Certificate

FROM: MARYANN CLAY
Name (printed or typed)

-04/26/99--01115--012
*****70.00 ******70.00

114 PASEO COURT
Address

ROYAL PALM BEACH, FL 33411 City, State & Zip

_(800) 950-2049 Voice Pager Number

Note: Please provide the original and one copy of the articles.



ARTICLES OF INCORPORATION

The Total The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE 1 NAME

The name of the corporation shall be:

WORKER BEE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

114 PASEO COURT ROYAL PALM BEACH, FL 33411

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 (ONE HUNDRED SHARES)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: MARYANN CLAY

114 PASEO COURT ROYAL PALM BEACH, FL 33411

ARTICLE V INCORPORATOR (S)

The name(s) and street address(es) if the incorporator(s) to these Articles of Incorporation is (are):

MARYANN CLAY, PRESIDENT 114 PASEO COURT ROYAL PALM BEACH, FL 33411

The undersigned incoporator(s) has (have) executed these Articles of Incorporation this 21st DAY OF APRIL, 1999.

Signature

Signature

Signature

Articles of Incorporation Filing Fee - \$35

<u>CERTIFICATE OF DESIGNATION OF</u> <u>REGISTERED AGENT/REGISTERED OFFCE</u>

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.501, FLORIDA STATUES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is <u>WORKER BEE, INC.</u>		-	
			SECULE TALLAND	
2.	The name and address of the registered agent and office is:		26 AMIII	
	MARYANN CLAY (Name)		: 36 STATE LORIDA	
	114 PASEO COURT (PO Box not acceptable)			
	ROYAL PALM BEACH, FL 33411 (City, State, Zip)			

Having been named as registered agent and to accept service of process for the above state corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Signature)

 $\frac{7}{\text{(Date)}}$

(Bignatune

DIVISION OF CORPORATIONS, PO BOX 6327, TALLAHASSEE, FL 32314